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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET					Application Number 10/585,109			Filing Date 18 January, 2007			☐ To be Mailed		
	Substitute	for Form l	PTO-1360		Applicant(s) SATO ET AL.						Page 1 of 1		
					* May be used for additional claims or amendm						ents		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 01/27/2009		AFTER SEC. AMENDMENT		*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
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6				X			56						
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10				2			60						
11 12				(1)			61 62						
13				(1)			63						
14				(1)			64						
15				X			65						
16				X			66						
17				(1)			67						
18				X			68 69						
19 20				X X			70						
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50							100						
Total			2				Total						
Indep							Indep						
Total Depend				14			Total Depend						
Total			1	<u> </u>			Total						
Claims							Claims						

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